**Council for Technical Education & Vocational Training**

**Sanothimi, Bhaktpur**

**Medical and Surgical Nursing I (Clinical)**

**Evaluation Scheme**

**Subject: Medical and Surgical Nursing I****Full Mark**: 100

**Location of Practice**: Medical/Surgical Ward

|  |  |  |  |
| --- | --- | --- | --- |
| **SN** | **Activities** | **Marks** | **No. of Assessment** |
| 1. | Clinical Performance | 20 | 1 |
| 2. | Clinical Health Teaching   * Medical * Surgical | 5  5 | 2 |
| 3. | Case study   * Medical * Surgical | 20  20 | 2 |
| 4. | Neurological Assessment Tray Preparation | 10 | 1 |
| 5. | Gadgets | 10 | 1 |
| 6. | Procedure Check List (Log book) (NNC) | 10 | 1 |
|  | **Total** | **100** |  |

**Council for Technical Education & Vocational Training**

**Sanothimi, Bhaktapur**

**Course**: PCL Nursing **Student Name**:

**Subject**: Medical and Surgical Nursing I (Clinical) **Full Mark**: 20

**Year**: Second **Pass Mark**: 10

**Area of practice**: Medical/Surgical ward **Obtained Mark**:

1. **Clinical Performance**

**Direction**: Each student will spend 14 weeks in the medical, surgical units. At the completion of each unit the student’s performance will be evaluated using following criteria.

**Key for Marking:**

Satisfactory Good Excellent

1 1.5 2

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **SN** | | **Expected Behaviour** | **1** | **1.5** | **2** |
| **1** | | **Communication:**   * 1. Communicate effectively with clients and families in any situation.   2. Report pertinent changes in client's condition to supervisor/ concerned authority.   3. Record appropriately the client's problems, action taken to relive the problems the client’s response to care and any modifications needed in the care.   4. Demonstrate respect to the beliefs and practices of clients and families while dealing with them. |  |  |  |
| **2** | | **Application of Nursing Process :**  2.1 Identify the patient’s needs using nursing process  2.2 Identify present and potential problems of patient through assessment  2.3 Prioritize the patient’s problems according to their importance  2.4 Plan appropriate nursing care of patient based on needs  2.5 Apply knowledge from the physical and social sciences in planning and  implementing the care plan  2.6 Implement care plan using available resources and involve the patient  and family  2.7 Evaluate goal achievements and reassesses if goal is not achieved or  partially achieved |  |  |  |
| **3** | **Teaching:**  3.1 Counsel patients and families to cope with temporary or permanent  disabilities as a result of illness  3.2 Teach patients and families to promote and maintain their health  3.3 Help patient to perform appropriate exercises to prevent complications  3.4 Prepare patient for discharge, give discharge teaching to patient family  regarding follow up and home care | |  |  |  |
| **4** | **Performance of Procedure:**  4.1 Explain the purpose of any procedure ( nursing, diagnostic or operative)  to the patient before starting procedure  4.2 Respect the dignity of the patient by providing privacy when performing  procedure  4.3 Perform nursing procedures completely  4.4 Maintain privacy during procedures  4.5 Keep client clean and comfortable after performing any procedure  4.6 Apply universal precautions throughout care to prevent the patient &  healthcare providers from Nosocomial Infection & HIV,HBV, HCV,STI  4.7 Dispose all the waste properly & disinfect equipment after use and  replaces in proper place  4.8 Report and record procedure done including the condition of the clients  and reaction to procedure. | |  |  |  |
| **5** | **Professional Development:**  5.1 Seek new knowledge for professional growth by asking question &  Searching new knowledge  5.2 Demonstrate responsibility for patient's care by completing his/her  assignment before going off duty  5.3 Demonstrate respect to supervisor and accept feedback for  improvement  5.4 Demonstrate professional responsibility by being punctual on duty and  accountable for his/ her nursing actions  5.5 Demonstrate ability to cope calmly and rationally in clinical situations  5.6 Demonstrate professional behaviour  5.7 Work cooperatively with peers and members of the health team in  meeting the needs of the client and family | |  |  |  |
|  | **Total** | |  |  |  |

(**Total Marks Divide by 3)**

**Strengths:**

**Areas to be improved:**

**........................................ ..........................**

**Signature of Supervisor Date**

**Council for Technical Education & Vocational Training**

**Sanothimi, Bhaktpur**

**Course**: PCL Nursing **Student Name**:

**Subject**: Medical and Surgical Nursing I (Clinical) **Full Mark**: 5

**Year**: Second **Pass Mark**: 2.5

**Area of practice**: Medical Unit **Obtained Mark**:

**2.a. Clinical Health Teaching**

**Direction:** Each student has to give one health teaching in each unit (Medical/Surgical) during clinical experience. The following criteria will be used to evaluate health teaching in Medical/Surgical unit.

|  |  |  |  |
| --- | --- | --- | --- |
| **SN** | **Topic** | **Unit** | **Supervisor** |
| **1** |  |  |  |
| **2** |  |  |  |

**Key for Marking:**

**Satisfactory Good Excellent**

1 1.5 2

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **SN** | **Criteria** | **1** | **1.5** | **2** |
| 1 | Identifies specific need of patient & assess the level of learners. |  |  |  |
| 2 | Prepare objectives, content and method of evaluation. |  |  |  |
| 3 | Prepare & Uses appropriate visual aids as much as possible from local resources. |  |  |  |
| 4 | Prepare environment & seating arrangement appropriate to group. |  |  |  |
| 5 | Communicate clearly, audibly, confidently & maintain eye contact. |  |  |  |
| 6 | Teaches accurate, current information. |  |  |  |
| 7 | Stimulate learners for active participation |  |  |  |
| 8 | Praise the correct ideas expressed by the learners. |  |  |  |
| 9 | Summarize important aspect of the subject. |  |  |  |
| 10 | Evaluate the presentation by self & accept the feedback. |  |  |  |
|  | **Total** |  |  |  |

**(For student’s mark divide total by 4)**

**Strength:**

**Areas to be improved:**

**......................................... .........................**

**Signature of Supervisor Date**

**Council for Technical Education & Vocational Training**

**Sanothimi, Bhaktpur**

**Course**: PCL Nursing **Student Name**:

**Subject**: Medical and Surgical Nursing I (Clinical) **Full Mark**: 5

**Year**: Second **Pass Mark**: 2.5

**Area of practice**: Surgical Unit **Obtained Mark**:

**2.b. Clinical Health Teaching**

**Direction:** Each student has to give one health teaching in each unit (Medical/Surgical) during clinical experience. The following criteria will be used to evaluate health teaching in Medical/Surgical unit.

|  |  |  |  |
| --- | --- | --- | --- |
| **SN** | **Topic** | **Unit** | **Supervisor** |
| **1** |  |  |  |
| **2** |  |  |  |

**Key for Marking:**

**Satisfactory Good Excellent**

1 1.5 2

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **SN** | **Criteria** | **1** | **1.5** | **2** |
| 1 | Identifies specific need of patient & assess the level of learners. |  |  |  |
| 2 | Prepare objectives, content and method of evaluation. |  |  |  |
| 3 | Prepare & Uses appropriate visual aids as much as possible from local resources. |  |  |  |
| 4 | Prepare environment & seating arrangement appropriate to group. |  |  |  |
| 5 | Communicate clearly, audibly, confidently & maintain eye contact. |  |  |  |
| 6 | Teaches accurate, current information. |  |  |  |
| 7 | Stimulate learners for active participation |  |  |  |
| 8 | Praise the correct ideas expressed by the learners. |  |  |  |
| 9 | Summarize important aspect of the subject. |  |  |  |
| 10 | Evaluate the presentation by self & accept the feedback. |  |  |  |
|  | **Total** |  |  |  |

**(For student’s mark divide total by 4)**

**Strength:**

**Areas to be improved:**

**......................................... .........................**

**Signature of Supervisor Date**

**Council for Technical Education & Vocational Training**

**Sanothimi, Bhaktpur**

**Course**: PCL Nursing **Student** **Name**:

**Subject**: Medical and Surgical Nursing I (Clinical) **Full** **Mark**: 20

**Year**: Second **Pass** **Mark**: 10

**Area** **of** **practice**: Medical/ Ward **Obtained** **Mark**:

.

**3.a Case Study (Medical/ )**

**Directions:** Each student has to conduct one case study in Medical/surgical ward. The case study report will be evaluated with the following criteria.

**Key for Marking:**

**Satisfactory Good Excellent**

1 2 3

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **S N** | **Expected Behaviour** | **1** | **2** | **3** |
| 1 | Select an appropriate patient for comprehensive case study |  |  |  |
| 2 | Write a summary of past & present health of patient & family uses history taking form |  |  |  |
| 3 | Write complete physical examination report of patient |  |  |  |
| 4 | Explain thoroughly about disease with its causes, pathophysiology, sign & symptoms & compare it with references |  |  |  |
| 5 | Explain the patient’s Medical / Surgical management & compare it with appropriate references |  |  |  |
| 6 | Include plan of care stating patient’s problems & goals appropriately |  |  |  |
| 7 | Include teaching plan of patient & family about health promotion & illness prevention during patient’s hospitalization & before discharge |  |  |  |
| 8 | Identify health beliefs & practices of patients |  |  |  |
| 9 | Evaluate care given to patient realistically & demonstrate new knowledge through the study |  |  |  |
| 10 | Prepare complete clear and in-depth case study report & submit in time |  |  |  |
|  | **Total** |  |  |  |

**(Total Marks divided by 1.5)**

**Strength:**

**Areas to be improved:**

**......................................... .........................**

**Signature of Supervisor Date**

**Council for Technical Education & Vocational Training**

**Sanothimi, Bhaktpur**

**Course**: PCL Nursing **Student** **Name**:

**Subject**: Medical and Surgical Nursing I (Clinical) **Full** **Mark**: 20

**Year**: Second **Pass** **Mark**: 10

**Area** **of** **practice**: surgical Ward **Obtained** **Mark**:

.

**3.b Case Study (surgical )**

**Directions:** Each student has to conduct one case study in Medical/surgical ward. The case study report will be evaluated with the following criteria.

**Key for Marking:**

**Satisfactory Good Excellent**

1 2 3

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **S N** | **Expected Behaviour** | **1** | **2** | **3** |
| 1 | Select an appropriate patient for comprehensive case study |  |  |  |
| 2 | Write a summary of past & present health of patient & family uses history taking form |  |  |  |
| 3 | Write complete physical examination report of patient |  |  |  |
| 4 | Explain thoroughly about disease with its causes, pathophysiology, sign & symptoms & compare it with references |  |  |  |
| 5 | Explain the patient’s Medical / Surgical management & compare it with appropriate references |  |  |  |
| 6 | Include plan of care stating patient’s problems & goals appropriately |  |  |  |
| 7 | Include teaching plan of patient & family about health promotion & illness prevention during patient’s hospitalization & before discharge |  |  |  |
| 8 | Identify health beliefs & practices of patients |  |  |  |
| 9 | Evaluate care given to patient realistically & demonstrate new knowledge through the study |  |  |  |
| 10 | Prepare complete clear and in-depth case study report & submit in time |  |  |  |
|  | **Total** |  |  |  |

**(Total Marks divided by 1.5)**

**Strength:**

**Areas to be improved:**

**......................................... ......................... Signature of Supervisor Date**

**Council for Technical Education & Vocational Training**

**Sanothimi, Bhaktapur**

**Course**: PCL Nursing **Student Name**:

**Subject**: Medical and Surgical Nursing I (Clinical) **Full Mark**: 10

**Year**: Second **Pass Mark**: 5

**Area of practice**: Medical/Surgical **Obtained Mark**:

**4. Set-up Neurological Assessment Tray**

**Direction:** Each student has to prepare Neurological assessment tray in related clinical area. The Following Criteria will be used to evaluate the performance.

**Key for Marking:**

**Satisfactory Good Excellent**

1 1.5 2

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **S N** | **Criteria** | **1** | **1.5** | **2** |
| 1 | Identify and collect the articles needed for neurological assessment |  |  |  |
| 2 | Explain about the uses of each material containing in the tray |  |  |  |
| 3 | Describe the reason of preparing the neurological assessment tray |  |  |  |
| 4 | Complete the Neurological Assessment tray within time |  |  |  |
| 5 | Replace all the articles in appropriate place |  |  |  |
| **Total** | |  |  |  |

**Strength:**

**Areas to be improved**

**......................................... .........................**

**Signature of Supervisor Date**

**Council for Technical Education & Vocational Training**

**Sanothimi, Bhaktpur**

**Course**: PCL Nursing **Student Name**:

**Subject**: Medical and Surgical Nursing I (Clinical) **Full Mark**: 10

**Year**: Second **Pass Mark**: 5

**Area of practice**: Orthopaedic ward **Obtained Mark**:

**5. Gadget used at Orthopedic Ward**

**Direction:** Each student should know about uses & importance of different orthopedic devices

During their clinical posting and prepare a list of Gadget and submit to the concerned supervisor.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **S.N** | **Name of equipment** | **Types** | **Uses** | **Remarks** |
|  |  |  |  |  |

**Strengths:**

**Areas to be improved:**

**......................................... .........................**

**Signature of Supervisor Date**

**Council for Technical Education & Vocational Training**

**Sanothimi, Bhaktapur**

**Course**: PCL Nursing **Student Name**:

**Subject**: Medical and Surgical Nursing I (Clinical) **Full Mark**: 10

**Year**: Second **Pass Mark**: 5

**Area of practice**: Medical / Surgical **Obtained Mark**:

**6. Procedure Check List (Log Book) NNC**

**8.**

**Directions:** Each student will be given procedure check list and will be responsible to fill it with the date of performance and evaluation. The supervisor should be informed to evaluate prior to perform specific procedure. If the procedure performance is under standard, it should be re-perform next time.

At the completion of the course, the student will be responsible for returning in the procedure checklist to the class coordinator.

**Note:** The critical \*\*procedures must be done by each student.

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **S N** | **Procedure/unit** | **Dates of**  **Performing procedure** | **Evaluation Date** | **Signature of Supervisor** | **Comment** |
| 1. | **Orthopaedic**  1.1 Assist in application of plaster cast and care of the patient  1.2 Assist in application of skin& skeleton, traction and care of patient in traction.  1.3 Application of orthopaedic devices  1.4 Assist with crutch walking |  |  |  |  |
| 2 | **Neurological**  2.1 Monitor Glascow Coma Scale (GCS)  2.2 Preparation of patient for lumber puncture  and assist in procedure |  |  |  |  |
| 3 | **Respiratory**  \*\*3.1 Administration of oxygen.  \*\*3.2Chest physiotherapy.  3.3 Closed chest tube drainage.  3.4 Care of patient with water sealed chest drainage.  3.5 Preparation of patient for thoracocenthesis and assist in procedure.  3.6 Preparation of patient for bronchoscope. |  |  |  |  |
| 4 | **Urinary**  \*\*4.1 Insertion of Foley’s Catheter  4.2 Preparation of patient for IVP test.  \*\*4.3 Urine test for Sugar and Albumin.  \*\*4.4 Maintain of I/O chart. |  |  |  |  |
| 5 | **Gastrointestinal**  5.1 Insertion of Nasal Gastric Tube.  5.2 Irrigation of Nasal Gastric Tube  5.3 Tube feeding  5.4 Preparation for Gastric lavage  5.5 Care of patient with colostomy ileostomy  care  5.6 Preparation for liver biopsy  5.7 Preparation for  - Gastric analysis  - Cholecystrogram  - Cholengiogram  - Ultrasound  - Barium meal  - Barium enema  - Endoscopy  5.8 Prepare and assist patient for abdominal paracentesis |  |  |  |  |
| 6 | **Circulatory**  \*\*6.1 Administration of IV Infusion and Blood Transfusion  6.2 Immediate care of patient with  haemorrhage (shock treatment,  pressure dressing)  6.3 Manage the patient for Cardio Pulmonary  Resuscitation (CPR)  Preparation patient for Bone Marrow  Aspiration |  |  |  |  |
| 7 | **Eye, Ear, Nose and Throat**  \*\*7.1 Application of eye medication & dressing  7.2 Prepare irrigation eye  7.3 Removal of Foreign Body from Eye & ENT  7.4 Application of ear drops and irrigation  7.5 Instillation of nose drops  7.6 Care of the patient with nasal bleeding  7.7 Insertion of nasal packing  7.8 Suctioning of :  - Nose  - Mouth  - Trachea  7.9 Tracheotomy care  7.10 Removal of endotracheal tube |  |  |  |  |
| 8 | **Care of patient with**  8.1 Radio Chemotherapy treatment |  |  |  |  |
| 9 | **Operation Theatre Procedure**  \*\*9.1 Surgical scrub  \*\*9.2 Surgical gowning  \*\*9.3 Surgical gloving  \*\*9.4 Positioning of patient on the operating table  \*\*9.5 Basic instrument and supplies needed for minor abdominal operation  \*\*9.6 Basic instrument and supplies needed for major abdominal operation  \*\*9.7 Cleaning, Packing and wrapping instruments and supplies for sterilization  \*\*9.8 Chemical sterilization of sharp instruments  \*\*9.9 Preparation of anaesthesia tray  \*\*9.10 Participation in circulating and scrub  nurse |  |  |  |  |
| 10 | **Pre &Post Operative Care**  \*\*10.1 Psychological preparation  \*\*10.2 Physical preparation  \*\*10.3 Pre operative teaching  \*\*10.4 Medication used  \*\*10.5 Post operative care for first 24 hours |  |  |  |  |
| 11 | **Mental Health**  11.1 Preparation and care of patient with electro convulsive therapy |  |  |  |  |
| 12 | **Dealing of Emergency**  \*\*12.1 Use of emergency drugs |  |  |  |  |

**Strengths :**

**Areas to be improved:**

**......................................... .........................**

**Signature of Evaluator Date**

\ **Appendix**

Council for Technical Education & Vocational Training

Sanothimi, Bhaktapur

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| --- |
| **Nursing Care Plan Format** |

Name of the Patient: Date of Admission:

Age/Sex: Diagnosis:

I.P. No.: Bed No:

Ward: Date:

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **S.N.** | **Problem Assessment** | **Nursing Diagnosis** | **Expected Outcome (Goal)** | **Plan of Nursing Action** | **Scientific Principle/**  **Rational** | **Implementation of Action** | **Evaluation** |
|  | Subjective data:  Objective data: |  |  |  |  |  |  |

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**Signature of Supervisor Signature of student..**

**Date : Date :**